APR 0 5 2004

## PART B - FEE(S) TRANSMITTAL

plete and send his form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE **Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 26453 7590 01/06/2004

**BAKER & MCKENZIE 805 THIRD AVENUE** NEW YORK, NY 10022

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope that the Mail Stop ISSUE FEE address above, or being facsimile

	addra trans	ssed to nitted to	the Ma	il Stop TO, on	ISSUE FE the date in	E addr	ess aborbelow.	ve, or bein	g facsimile
	$\prod I$	ames	Dayr,	ad J	acobs	Kre	24.	299 199	ositor's uzme)
	H	Rago	, X	10	The second		Me		(Signature)
1	Æ	ril	5. 2	004	/	7			(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/785,761	02/16/2001	Grace Yiyn Ngan Chan	56104 <i>5</i> 7 <i>6</i> -55	2972
		1 /	1/	

TITLE OF INVENTION: ELECTROPHORESIS GELS

APPLN. TYPE	SMALL ENTITY	ISSUE FI	SE SE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	onprovisional YES			\$300	\$965	04/06/2004		
EXAMINER		ART UN	iT	CLASS-SUBCLASS				
NOGUEROLA, ALE	UEROLA, ALEXANDER STEPHAN			204-606000				
CFR 1.363).  Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Unless	ed to the USPTO or is being a	ow, no assignee da submitted under sep	ata will appe parate cover.	ar on the patent. Inclusion of	of assignee data is only appropr NOT a substitute for filing an ass	iate when an assignment has signment.		
Gradipore, I		•		Forest, NSW,	•			
Please check the appropriate	assignee category or catego	ries (will not be pri	inted on the p	natent); 🔾 individual	corporation or other private g	roup entity		
4a. The following fee(s) are	enclosed:	4b	. Payment of	Fee(s):				
CXIssue Fee				A check in the amount of the fee(s) is enclosed.				
NPublication Fee				☐ Payment by credit card. Form PTO-2038 is attached.				

The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number \_\_\_\_\_02\_0393\_\_\_\_\_\_ (enclose an extra copy of this form). ☐ Advance Order - # of Copies \_

Diffector for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above

James David Jacobs (Reg. 10) 24.2991 4/5/2004 (Authorized Signature) (Date

MCTE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorpey or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

interest as shown by the records of the United States Patient and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including galtering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Peatent and Trademark Office, U.S. Department of Commerce, Alexandrin, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

04/06/2004 AWONDAF2 00000201 020393 09785761

01 FC:2501 665.00 DA 300.00 DA 02 FC:1504

TRANSMIT THIS FORM WITH FEE(S)